

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Conservative Campaign Committee			FEC IDENTIFICATION NUMBER ▼ C C00495010		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee WVLA			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 22 / 2014		
Mailing Address 10000 Perkins Road			Amount 782		
City State Zip Code Baton Rouge LA 70810-1527		Transaction ID : 136109 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 20 / 2014			
Purpose of Expenditure 11/22 and 11/23 Television Advertising		Category/Type 			
Name of Federal Candidate Mary Landreau			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: LA		
Calendar Year-To-Date Per Election for Office Sought 14096.19			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Russo Marsh & Associates, Inc. [MEMO ITEM] #14-65-1191			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 20 / 2014		
Mailing Address 8795 Folsom Boulevard Suite 103			Amount 1865.19		
City State Zip Code Sacramento CA 95826-3720		Transaction ID : 136111 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 20 / 2014			
Purpose of Expenditure Television Production		Category/Type 			
Name of Federal Candidate Mary Landreau			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: LA		
Calendar Year-To-Date Per Election for Office Sought 14096.19			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			782.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Kelly Lawler</u> <div style="text-align: right;">[Electronically Filed]</div>			Date M M M / D D D / Y Y Y Y Y Y 11 / 20 / 2014		